

Work Order ID 100218

100218

Page 1

Item ID: D407-605-045

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Rear Locker Extender

Start Date: 4/19/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 5/03/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-04-19

Tooling:

Date:

Run Start *NR1*

QC: Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4738	A

100	DOCUMENT CONTROL	0.00
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100

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels per PPP D407-605-045 CHG001

110	PURCHASING	0.00
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110

Purchasing

Memo

0.00

Purchasing

Issue P/O: 19655
 Manufacture as per dwg D4738-1
 Description: D407-605-045 Rear Locker Extender.
 Supplier: Carbon-by-Design.
 Certification of Conformity and process sheet from Carbon-by-Design is required.

D4738 Rev. A
 407 REAR LOCKER EXTENDER
 DOM: 6/10/2013 SN: 15218-2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 100218

April-19-13 1:45:09 PM

100218

Page 2

Item ID: D407-605-045

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Required Date: 5/03/13 Req'd Qty: 1.00

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Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

Receive & Inspect for Damage & Mat'l Certs

0.00

120

Packaging

Memo

0.00

Packaging

Ensure a copy of Certification of Conformity and process sheet from Carbon-by-Design is attached.

12/4/14

130

QC6- Inspect dimensions to drawing

0.00

130

QC

Memo

0.00

Quality Control

Check hole locations to template DT9910. Check process sheet and audit.

13617

135

0.00

135

Small Fab

Memo

0.00

Small Fab

Install placard as per dwg

12/6/21 SP

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
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<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

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Page 3

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Start Date: 4/19/13 Start Qty: 1.00 *1*

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Required Date: 5/03/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start *NR1*
QC: Date: SPC (Y/N): Date: Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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140 QC5- Inspect part completeness to step on W/O

0.00

140

QC

Memo

0.00

Quality Control

13621

145 Pick Kit

0.00

145

Packaging

Memo

0.00

Packaging

13621sf

147 QC4- 100% Inspect kits for completeness

0.00

147

QC

Memo

0.00

Quality Control

13621

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
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Work Order ID 100218

April-19-13 1:45:09 PM

100218

Page 4

Item ID: D407-605-045

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Rear Locker Extender

Start Date: 4/19/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 5/03/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150		0.00							
150	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D407-605-045								
	Location: _____								
	PPP Rev: _____								
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							
Quality Control									

13/6/21 SP SL

13/6/26 DJ

13-06-25

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

April-19-13 1:45:12 PM

Work Order ID: 100218

Parent Item: D407-605-045

Parent Item Name: Rear Locker Extender

100218

D407-605-045

Start Date: 4/19/13

Required Date: 5/03/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 13.04.19 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AN526C832R8 Screw		Purchased	No				Each	140.0000		8	125752		

AN526C832R8

**

Location

ST345

122814

123522

124552

Loc Qty

140

8

32

100

Loc Code

D2567 Placard		Manufactured	No				Each	14.0000		4	10266350		
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D2567

**

Location

ST011

74981

81896

Loc Qty

14

4

10

Loc Code

D407-605-045P Rear Locker Extender		Purchased	No				Each	0.0000		1	150318		
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D407-605-045P

**

NAS1149DN816J Washer		Purchased	No				Each	406.0000		8	131612180		
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NAS1149DN816J

**

Location

ST293

116712

122027

Loc Qty

406

79

327

Loc Code

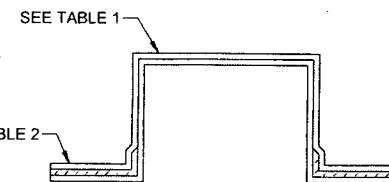
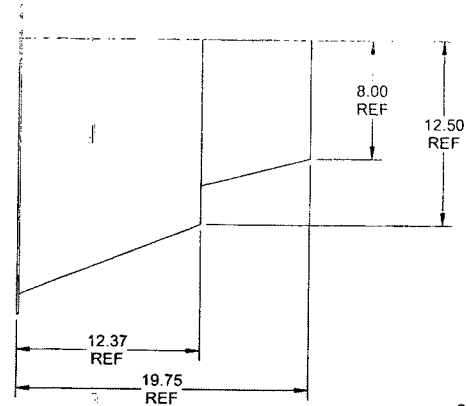
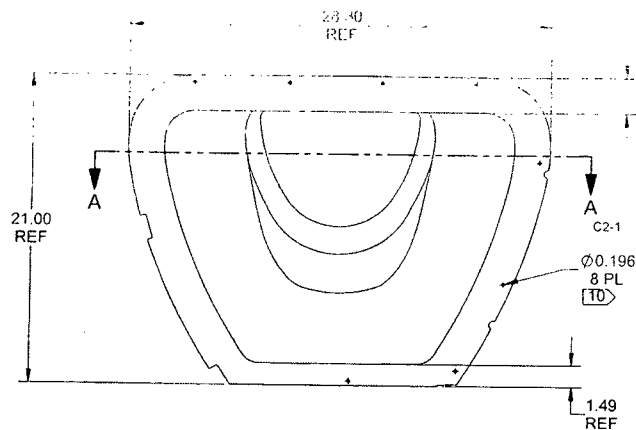
NCR: Yes / No

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D4738-1 REAR LOCKER EXTENDER

SECTION A-A
D7-1

TABLE 1

POSITION	MATERIALS
1	TOOL SURFACE
2	GEL COAT
3	7725 FIBER GLASS
4	3/4 oz CHOPPED STRAND MAT
5	7725 FIBER GLASS
6	7725 FIBER GLASS
7	PRIMER

TABLE 2

POSITION	MATERIALS
1	TOOL SURFACE
2	GEL COAT
3	7725 FIBER GLASS
4	3/4 oz CHOPPED STRAND MAT
5	7725 FIBER GLASS
6	7725 FIBER GLASS
7	7725 FIBER GLASS
8	7725 FIBER GLASS
9	7725 FIBER GLASS
10	PRIMER

TABLE 3

MATERIAL USED	DESCRIPTION
GEL COAT	4314-001 DURA FR WHITE GEL COAT
FIBER GLASS MAT	OWENS CORNING OR EQUIVALENT 3/4 oz CHOPPED STRAND MAT
FIBER GLASS CLOTH	HEXCEL 7725 FIBER GLASS
RESIN SYSTEM	PCCR 7524425UPR
PRIMER	DEFT MIL-PRF-85582E TYPE 1, CLASS 1

- NOTES:**
- 1) MATERIAL: SEE TABLE 3
 - 2) FINISH: SEE TABLES 1, 2, & 3
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
 - 7) WEIGHT: 4.0 - 6.0 lbs
 - 8) LAMINATE PER DART QSI 006. LAMINATION SCHEDULE PER THIS DRAWING
 - 9) LAYUP USING DT9871 MOLD. WET LAYUP WITH BAG/VACUUM
 - 10) TRIM & DRILL PER DT9908. OPEN HOLES TO Ø0.196
 - 11) CONSTRUCTION: SEE TABLES 1 & 2
 - 12) MATTE TO HOLD DOWN CORNERS AS REQUIRED

RELEASED
2013-04-17

REV.	NEW ISSUE	DESCRIPTION	DC	13.03.13
BY			DATE	
DESIGN	BC			
DRAWN	BC			
CHECKED	BC			
MFG. APPR.	BC			
APPROVED	BC			
DE APPR.	BC			
DATE	13.03.13			

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D4738** REV. A
SHEET 1 OF 1
TITLE **407 REAR LOCKER EXTENDER** NTS

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UNCONTROLLED
SUBJECT

NO 100218 MLJ
13-04-19



carbon by design

4128 Avenida De La Plata - Oceanside, CA 92056
Phone: 760-643-1300 Fax: 760-643-1333
www.carbonbydesign.com

Packaging List

Date: 6/12/2013

Packaging List No. 15218

Cage Code: 4DG17

CBD Work Order No. 7153

Customer PO No.: PO19655

Billing Address

Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
613-632-5200

Please Deliver To:

Dart Aerospace LTD
1270 Aberdeen
Hawkesbury, ON K6A 1K7
Canada

Customer Phone	Terms	Rep	Ship Date	Ship Via	Buyer
613-632-5200	Net 30	JB	6/12/2013	FedEx Next Day	Customer

Item	Line #	Description	Qty
D4738		Dart, D4738, 407 Rear Locker Extender; Rev: A B100219 S/N: 15218-1	1
D4738		Dart, D4738, 407 Rear Locker Extender; Rev: A B100218 S/N: 15218-2	1

Pricing Good For 30 Days

Total Items: _____ SHIPPING VALUE
\$1,250.00

CERTIFICATE OF CONFORMANCE (SHORT FORM CUSTOMERS ONLY)

I certify that on _____, the Carbon by Design LP furnished the supplies or services called for by the Purchase Order Above via Delivery in accordance with all applicable requirements.

I further certify that the supplies or services are of the quality specified and conform in all respects with the contract requirements, including specifications, drawings, preservation, packaging, packing, marking requirements, and physical item identification, and are in the quantity shown in this or on the attached acceptance document.

Quality: _____

Date: 6-12-13

WARNING - This document and its attachments may contain technical data, export of which is restricted by the International Traffic in Arms Regulations (ITAR) or the Export Administration Act (EAA) of 1979, as amended. Disclosure to foreign persons without prior U.S. Government approval is prohibited. Violations of these export laws and regulations are subject to severe civil and criminal penalties.

**carbon by design**

6/11/2013

CERTIFICATE OF CONFORMANCE

PO: No.: PO19655	DESC: 407 Rear Locker Extender	Insp: JB/RKO	Packing #: 15218
Customer: Dart Aerospace Ltd	Drawing: DWG D4738 Rev A	Qty: 2	Serials: 15218-1/15218-2

Work Requirements:

Statement of Work: SOW on file
Internal Process Doc.: 2206-253
Inspection Document: 2206-253
Manufacturing Process: Infusion
Security Requirement: Confidential

Approved Non-Conformances: NO**Pending:** NO**DISPOSITION:** To Customer, Ship**SHIP METHOD:** FedEx Next Day

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Certification Statement:

Carbon by Design LP certifies the items listed above conform to all of the applicable work and quality standard required in the purchase order listed above and any additional work requirements referenced.

All in process quality standards have been met according to customer requirements and Carbon by Design internal quality and finish requirements. All materials Certification are available for inspection and will remain on file at Carbon by Design for a period of no less than ten years.

Finished Materials/Process Specifications:

Per Drawing Requirements

Additional Quality Clauses:

Per PO Requirements, 100% Inspection

Active Quality Systems:

ISO9001:2008

Signature: **Inspector's Name:** Joel Barrera**Title:** Quality Manager**Date:** 6/11/13